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Feb 18 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000058548 (4)**

1. Corporation Name

**FOURPLAY ART, INC.**

Principal Place of Business

**718 LINCOLN ROAD  
MIAMI BEACH FL 33139**

Mailing Address

**718 LINCOLN ROAD  
MIAMI BEACH FL 33139-2814**

3. Date Incorporated or Qualified

**07/11/1996**

3a. Date of Last Report

2. Principal Place of Business

**21 718 Lincoln Rd.**

2a. Mailing Address

**26 Suite, Apt. #, etc. SAME**

Suite, Apt. #, etc.

**22**

City & State

**23 Miami Beach, FL**

Zip

**24 33139**

Country

**25 DADE**

City & State

Zip

**29**

Country

**30**

9. Name and Address of Current Registered Agent

**DONNELLY, RUSSELL  
718 LINCOLN ROAD  
MIAMI FL 33139**

10. Name and Address of New Registered Agent

81 Name

**82 Janice Barnhart**

Street Address (P.O. Box Number is Not Acceptable)

**83 718 Lincoln Road**

City

**84 Miami Beach FL**

Zip Code

**85 33139**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE **Janice L. Barnhart**

Signature, typed or printed name of registered agent and file if applicable

(NOTE: Registered Agent signature required when reinstating)

**1/26/97**

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☒ DELETE

NAME **DONNELLY, RUSSELL**  
STREET ADDRESS **718 LINCOLN ROAD**  
CITY-ST-ZIP **MIAMI BEACH FL 33139**

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PRESIDENT** ☒ Change ☐ Addition

1.2 NAME **JANICE BARNHART**  
1.3 STREET ADDRESS **718 LINCOLN ROAD**  
1.4 CITY-ST-ZIP **MIAMI BEACH, FL 33139**

2.1 TITLE **SECRETARY** ☒ Change ☒ Addition

2.2 NAME **Debbie Long**  
2.3 STREET ADDRESS **718 LINCOLN ROAD**  
2.4 CITY-ST-ZIP **MIAMI BEACH, FL 33139**

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

**100002091331**  
**-02/19/97--01005--051**  
**\*\*\*165.00**

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

CR2E034 (9/96)